

Micronas.6232

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Hahn et al. **GROUP:** 2614
SERIAL NO: 09/859,684 **EXAMINER:** Brian P. Yenke
FILED: May 17, 2001
FOR: METHOD AND APPARATUS FOR MEASURING THE
 NOISE CONTAINED IN A PICTURE

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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 OCT 14 2004

Sir:

AMENDMENT FEE TRANSMITTAL

Following entry of the accompanying amendment, an additional fee in the amount set forth below is required to cover the extra claims which the applicant has not yet paid for. The fee is calculated as follows:

	Claims already paid for				
Total Claims:	17	- 20	=	0x	\$18= \$
Independent Claims:	5	- 3	=	2x	\$88= \$176.00
Multiple-Dependent-Claim Fee :					\$
Total of the Above Calculations:					\$ 176.00
<input type="checkbox"/>	Less 50% reduction for small entity.....				\$ 0
TOTAL EXTRA CLAIM FEE NOW DUE.....					\$176.00

Payment

- ☐ Check in the amount set forth above.
☒ Charge Account No. 19-0079 in the amount of \$176.00.

Respectfully submitted,

Patrick J. O'Shea
 Patrick J. O'Shea
 Registration No. 35,305
 Gauthier & Connors, LLP
 225 Franklin Street, Suite 3300
 Boston, Massachusetts 02110
 Telephone: (617) 426-9180 x121

CERTIFICATE OF TRANSMISSION

I hereby certify that this Fee Transmittal and the accompanying Second Preliminary Amendment are being transmitted via facsimile to Assistant Commissioner of Patents, Alexandria, VA 22313-1450, to the attention of Examiner Brian P. Yenke at facsimile number 703/293-1144 on 09/09/2004 at 09:00:00. 198879 09859684

Tanya R. Belland
 Tanya R. Belland

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

69859684
Microhas. 6232

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	0
INDEPENDENT CLAIMS	minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

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AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	2	Minus	20	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	\$55.00	OR	BASIC FEE	710.00
X\$9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	110

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

10-7-04

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus	20	=
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

10-14-04

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	17	Minus	20	=
Independent	5	Minus	3	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$9=		OR	X\$18=	
X40=		OR	X80=	176
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.